FORM D PROCESSED

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FINANCIAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

OMB APPROVAL				
OMB Number:	3235-0076			
Expires: May 31, 2005				
Estimated average burden				
hours per response 16.00				

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Prefix	1	Serial
D	ATE RE	CEIVED

UNIFORM LIMITED OFFERING EXEMI	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE RECEIVED
A. BASIC IDENTIFICATION DATA	13
1. Enter the information requested about the issuer	// JUL 2 2 ZOU4 //
Name of Issuer (70
Address of Executive Offices (Number and Street, City, State, Zip Code) 10655 Sorrento Valley Road, San Diego, California 92121	Telephone Number (including Area Code) (858) 558-6064
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Biotechnology research and development company	
Type of Business Organization Corporation limited partnership, already formed other (public partnership), to be formed	lease specify): 04038877
Month Year Actual or Estimated Date of Incorporation or Organization: 0 7 8 8 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	nated DE
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D.or	Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission. 450 Fifth Street, N.W. Washington, D.C 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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BASIC IDENTIFICATION DATA Enter the information requested for the following: · Each promoter of the issuer, if the issuer has been organized within the past five years, • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Executive Officer Director General and/or Beneficial Owner Managing Partner Full Name (Last name first, if individual) Parmeter, J. Thomas Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Neves, Janis Y. Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Davis, Phillip J. Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Executive Officer ☐ Beneficial Owner Director Check Box(es) that Apply: General and/or Promoter Managing Partner Full Name (Last name first, if individual) Kaplan, Donald S. Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Cappello, Joseph Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Beneficial Owner Promoter Executive Officer General and/or Check Box(es) that Apply: Director Managing Partner Full Name (Last name first, if individual) Ferrari, Franco Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Flowers, John E. Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Executive Officer General and/or Beneficial Owner x Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Walker, George R. Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Lamon, Steven M. Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Executive Officer General and/or Check Box(es) that Apply: Promoter Beneficial Owner x Director Managing Partner Full Name (Last name first, if individual) Kuhn, Kerry L. Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Cape, Edward G. Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Beneficial Owner Executive Officer Check Box(es) that Apply: Promoter x Director General and/or Managing Partner Full Name (Last name first, if individual) Peltzman, Steve Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Redec & Associates LLC Business or Residence Address (Number and Street, City, State, Zip Code) c/o 10655 Sorrento Valley Road, San Diego, California 92121 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Johnson & Johnson Development Company Business or Residence Address (Number and Street, City, State, Zip Code) One Johnson & Johnson Plaza, New Brunswick, NJ 08933

,		F		В	INFORM	ATION AB	OUT OFFE	RING				
								No X				
2. What is the minimum investment that will be accepted from any individual?												
2. What is the minimum investment that will be accepted from any individual?							Yes	Nõ				
3. Does the	e offering	g permit jo	int owners	hip of a si	ngle unit?		,,,,,,,,,,,,,,,,,	,				×
commiss If a person or states	 Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. It more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. 											
Full Name	(Last nam	e first, if ir	dividual)									
Business or	r Residenc	e Address	(Number a	nd Street	City State	Zip Code)			<u> </u>			
Dustriess	represent				·		·	4			<u> </u>	
Name of A	ssociated	Broker or	Dealer	. •							-	
States in W	/hich Pers	on Listed	Has Solicit	ed or Inter	nds to Solic	it Purchase	ers				<u> </u>	
(Checl	k "All Sta	les" or chec	k individu:	al States)				···········			🗆	All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last nam	e first, if in	dividual)						-	:•		
Business or	r Residen	ce Address	(Number a	and Street,	City, State	, Zip Code)	-			,	
Name of A	ssociated	Broker or l	Dealer						<u> </u>			<u> </u>
States in W	hich Pers	on Listed	Has Solicit	ed or Inter	ıds to Solic	it Purchase	ers					
(Check	k "All Stat	es" or chec	k individua	al States)	******				*******			All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last nam	e first. if in	dividual)	, e di m								
Business or	Residenc	e Address	(Number a	ınd Street,	City, State,	Zip Code)					
*	. 200 000								. 1.			
Name of A	ssociated	Broker or l	Dealer								ı.b	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States)												
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CI] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
1. Enter the aggregate offering price of securities included in this offering and the total amount alreated. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, the this box and indicate in the columns below the amounts of the securities offered for exchange a clearly exchanged.	ck	
already exchanged. Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$150,000	S-150,000
Ečuity.		s o
Common Preferred		
Convertible Securities (including warrants)	\$ 0 (see note) below)	\$ 0
Partnership Interests.		50
		S 0
Other (Specify)		\$.450,000
Answer also in Appendix, Column 3. if filing under ULOE.	9	
2. Enter the number of accredited and non-accredited investors who have purchased securities in to offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indice the number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "O" if answer is *Inone" or "zero."	ate	**
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors.	4	S_150,000
Non-accredited Investors		S <u>o</u>
Total (for filings under Rule 504 only)		Ş ÎM,
Answer also in Appendix, Column 4, if filling under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securit sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C Question 1	c	
Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A	<u> </u>	s <u> </u>
Rule 504	•	\$
Total	••.	<u> </u>
a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of the insurement of the information may be given as subject to future contingencies. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	rer.	
Transfer Agent's Fees	<u>П</u>	<u>\$ 0</u>
Printing and Engraving Costs		§ 0
Legal Fees		5 ∋1,000

\$ 0

S 0 S 250

S 1,250

Sales Commissions (specify finders' fees separately)

Total

Other Expenses (identify) Blue Sky fees

¹ The offering included the issuance of warrants to purchase up to 60,000 shares of common stock of the issuer, of which 60,000 such warrants have been issued. Each warrant may be exercised by its holder at \$0.37 per share.

L	OFFERING PRICE, NUMBER OF INVESTORS, EXPENSE	S AND USE OF PROC	EEDS	· · · · · · · · · · · · · · · · · · ·
	b. Enter the difference between the aggregate offering price given in response to P and total expenses furnished in response to Part CQuestion 4.a. This difference is t proceeds to the issuer."	the "adjusted gross		s_148,750
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or propo- each of the purposes shown. If the amount for any purpose is not known, furnish check the box to the left of the estimate. The total of the payments listed must equal proceeds to the issuer set forth in response to Part CQuestion 4.b above.	n an estimate and		
		Œ.	nyments to Officers. irectors, & Affiliates	Payments to Others
	Salaries and fees	s. [] s <u>·</u>) .	<u> </u>
	Purchase of real estate	s)	s_ <u>0</u>
	Purchase, rental or leasing and installation of machinery and equipment		0':	□ s <u>0</u>
	Construction or leasing of plant buildings and facilities	<u> </u>	0	s <u>0</u>
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		n	□ \$ <u>0</u>
	Repayment of indebtedness			$\Box s$ 0
	Working capital			S 148,750
	Other (specify):			□s ⁰
	oner (speen)).			
		 .	0:	<u> 5.0</u>
	Column Totals			□ <u>s.0</u>
	Total Payments Listed (column totals added)		⋉ 3 <u>14</u>	8,750
Γ	D. FEDERAL SIGNATUR	E		
sign	e issuer has duly caused this notice to be signed by the undersigned duly authorized per mature constitutes an undertaking by the issuer to furnish to the U.S. Securities and to information furnished by the issuer to any non-accredited investor pursuant to parag	Achange Commission,	upon written	505, the following request of its staff,
İsst	uer (Print or Type) Signature	Date		
Pr	otein Polymer Technologies, Inc.	July July	15, 2004	
	me of Signer (Print or Type) Title of Signer (Print or Type)		·	
J	Thomas Parmeter Chairman of the Board & C	hief Executive Offic	er	

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C.1001.)